

## Resume

Contribution to social services for mentally disabled people

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My thesis deals with a new phenomenon in Czech law – financial contribution to social services - and its consequences to mentally disabled people, particularly to mentally disabled people living in sheltered housing. Since January 1<sup>st</sup> 2007 providers of social services charges statutory fees for a separate service. Fees are to be covered from financial contribution to social services, which is under Act No. 108/2006 Coll., imbursed to all persons meet legal conditions. In my work I focused on people who leave mental hospitals and after a long-term hospitalization lose their ability to cope with all necessities associated with a life in common society. Do these people need the financial contribution to social services? What are the main problems these people met in the course of application for the contribution and where do the problems originate?

The basis for answering thesis questions was a research among clients of a sheltered housing and theirs social workers. Semi-structured interview and case study were used as a research method. Outputs of the research might have generated particulars which helps to recognize the main difficulties often appear within the procedure steps of application for the contribution. I further expected that on the basis of the research my thesis would name particular parts of the procedure which do not take into consideration the specificities of mentally disabilities.

Outcomes of the research could indicate following discrepancies in the official procedure of application for assigning of the contribution to social services. The main discrepancy consist in the list of the individual acts of self-sufficiency and self-care according to which is each applicant's eligibility judged. These acts are, for mentally disabled people in sheltered housing, physical easy to cope with and represent no limitation in theirs everyday life. What represents limitation is, in practice, disability to recognize the necessity of regular performing of above mention acts for not being excluded from society. This fact is not taken into consideration during the official procedure. When applicant is in the physical way able to perform most of the acts from the list, he/she is not treated as a eligible for social services and the financial contribution is not assigned. Client then has no money to buy social services he/she, in fact, needs and often currently uses. Other discrepancy might often consist in the

fact, that most mental disabilities don't proceed in the linear modus, client's mental health condition often dramatically changes. System of examination of eligibility of these clients for financial contribution to social services does not take this fact into account and latter is not assigned.

I have therefore concluded that mentally disabled people need a contribution to care, so they can pay for needed social services to help them return and retention in normal society. These services are to them often the only option for long-term stay in hospital.